

APPLICATION FOR VOTE BY MAIL BALLOT

FOR OFFICIAL USE ONLY

To obtain a vote by mail ballot, complete the information on this form. This application must be received by the election official no later than 5:00 p.m. on _____.

1. PRINT NAME: _____ **2. DATE OF BIRTH:** _____
mo/day/year

First Name Middle Name or Initial Last Name

3. RESIDENCE ADDRESS IN ALAMEDA COUNTY:

Number and Street (P.O. Box, Rural Route, etc. not acceptable) (Designate N, S, E, W if used)

City Zip Code

4. TELEPHONE NUMBER: (_____) _____ (_____) _____
daytime evening

5. PRINT MAILING ADDRESS FOR BALLOT (IF DIFFERENT FROM ABOVE):

NOTE: Organizations distributing this form may not preprint mailing address information.

Number and Street / P.O. Box (Designate N, S, E, W if used)

City State or County Zip Code

6. **Yes, I want to become a permanent vote by mail voter** _____
Initial

THIS APPLICATION WILL NOT BE ACCEPTED WITHOUT THE PROPER SIGNATURE OF THE APPLICANT

I have not applied for a vote by mail ballot for this election by any other means. I certify under **penalty of perjury** under the laws of the State of California that the name and residence address on this application are true and correct.

SIGNATURE

Date

WARNING: Perjury is punishable by imprisonment in state prison for two, three or four years.
(Section 126 of the California penal code)

NOTICE

You have the legal right to mail or deliver this application directly to the local elections official where you reside. The address is:

(name) REGISTRAR OF VOTERS
(address) COUNTY OF ALAMEDA
1225 FALLON ST RM G-1
OAKLAND, CA 94612
(phone) (510) 272-6973

Returning this application to anyone other than your elections official may cause a delay that could interfere with your right or ability to vote.

Any voter may apply for PERMANENT VOTE BY MAIL status. If you want to become a permanent vote by mail voter, check box in #6 and initial.

Failure to conform to this format may result in criminal prosecution.
Elections Code section 18402.

THIS FORM WAS PROVIDED BY: (name, address & telephone number) _____

From: _____



Postage
Required
Post Office will
not deliver
without proper
postage.



REGISTRAR OF VOTERS
COUNTY OF ALAMEDA
PO BOX 23340
OAKLAND CA 94623-2334